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PATENT  
Hart

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
Attorney Docket No. 0275S-500763

Application No.: 09/461,265

Filing Date: December 15, 1999

Applicant: Neil Mason

Group Art Unit: 3724

Examiner: Charles Goodman

Title: AN ARRANGEMENT FOR CLAMPING A SAW BLADE

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**RESPONSIVE AMENDMENT AFTER FINAL**

Sir:

In response to the Office Action mailed June 4, 2003, please amend the application as follows and consider the remarks set forth below.

**Amendments to the Claims** begin on page 2 of this paper.

**Remarks** begin on page 7 of this paper.



Please type a plus sign (+) inside this box →

AF/3724

HDP/SB/21 based on PTO/SB/21 (08-00)

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|                                          |  |                        |                   |
|------------------------------------------|--|------------------------|-------------------|
|                                          |  | Application Number     | 09/461,265        |
|                                          |  | Filing Date            | December 15, 1999 |
|                                          |  | First Named Inventor   | Neil Mason        |
|                                          |  | Group Art Unit         | 3724              |
|                                          |  | Examiner Name          | Charles Goodman   |
| Total Number of Pages in This Submission |  | Attorney Docket Number | 0275S-500763      |

### ENCLOSURES (check all that apply)

|                                                                              |                                                                                         |                                                                                                                                                                                                |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Assignment Papers<br>(for an Application)                      | <input type="checkbox"/> After Allowance Communication to Group                                                                                                                                |
| <input type="checkbox"/> Fee Attached                                        | <input type="checkbox"/> Drawing(s)                                                     | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                                                                                                            |
| <input checked="" type="checkbox"/> Amendment / Response                     | <input type="checkbox"/> Licensing-related Papers                                       | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)                                                                                                  |
| <input checked="" type="checkbox"/> After Final                              | <input type="checkbox"/> Petition                                                       | <input type="checkbox"/> Proprietary Information                                                                                                                                               |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Petition to Convert to a Provisional Application               | <input type="checkbox"/> Status Letter                                                                                                                                                         |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s)<br>(please identify below):                                                                                                                        |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Terminal Disclaimer                                            |                                                                                                                                                                                                |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> Request for Refund                                             |                                                                                                                                                                                                |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | <input type="checkbox"/> CD, Number of CD(s) _____                                      |                                                                                                                                                                                                |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application   | Remarks                                                                                 | The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed. |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |                                                                                         |                                                                                                                                                                                                |

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                               |                                  |                                   |                    |
|-------------------------------|----------------------------------|-----------------------------------|--------------------|
| Firm<br>or<br>Individual name | Harness, Dickey & Pierce, P.L.C. | Attorney Name<br>W.R. Duke Taylor | Reg. No.<br>31,306 |
| Signature                     |                                  |                                   |                    |
| Date                          | August 6, 2003                   |                                   |                    |

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

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| Typed or printed name | W.R. Duke Taylor |      |                |
| Signature             |                  | Date | August 6, 2003 |